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Attorney Docket No.: **NEC0250US**

Mail Stop Patent Application  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

22387 U.S. PTO  
10/662540  
09/15/03

Enclosed herewith for filing is a patent application, as follows:

Inventor(s): Wolfgang Roethig  
Title: **SYSTEM AND METHOD FOR CALCULATING EFFECTIVE CAPACITANCE FOR TIMING ANALYSIS**

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| <u>X</u>  | Return Receipt Postcard  |
| <u>X</u>  | This Transmittal Letter (1 page, in duplicate)                   |
| <u>16</u> | Page(s) Specification (not including claims)                     |
| <u>6</u>  | Page(s) Claims   |
| <u>1</u>  | Page(s) Abstract   |
| <u>7</u>  | Sheet(s) of Drawings: Figs. 1, 2, 3; 4; 5A, 5B; 6; 7; 8; 9 & 10  |
| <u>2</u>  | Page(s) Declaration For Patent Application and Power of Attorney |
| <u>1</u>  | page(s) Assignment   |
| <u>1</u>  | page(s) Recordation Form Cover Sheet (in duplicate)              |
| <u>1</u>  | Page(s) Information Disclosure Statement                         |
| <u>1</u>  | Page(s) PTO-1449   |
| <u>X</u>  | Copies of three (3) cited references                             |

**CLAIMS AS FILED**

| For                      | Number<br>Filed   |     |   | Number<br>Extra |   | Rate    |   | Basic Fee |
|--------------------------|---|-----|---|-----------------|---|---------|---|-----------|
| Total Claims             | 36  | -20 | = | 16              | x | \$18.00 | = | \$ 288.00 |
| Independent<br>Claims    | 8   | -3  | = | 5               | x | \$84.00 | = | \$ 420.00 |
| <input type="checkbox"/> | Fee of _____ for the first filing of one or more<br>multiple dependent claims per application |     |   |                 |   |         |   | \$        |
| <input type="checkbox"/> | Fee for Request for Extension of Time   |     |   |                 |   |         |   | \$        |

Please make the following charges to Deposit Account 502306:

- ☒ Total fee for filing the patent application in the amount of \$ **1458.00**  
☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account 502306.

EXPRESS MAIL LABEL NO:

EV 304737505 US

Respectfully submitted,

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